

POST JOB OFFER QUESTIONNAIRE

NAME _____

PLEASE PRINT

S. S. # _____

At this stage in the employment process, all applicants are required to provide answers to the following questions and, if necessary, complete an examination by a company-designated physician. This information is used to determine appropriate job placement. It is not used to disqualify an otherwise qualified person who may have a physical or mental disability that would be employable with reasonable accommodation. Any job offer is conditional based upon the medical history results, medical examination, and assignment availability.

1. Have you ever been refused employment because of your health, physical or mental condition? YES____ NO____

2. Do you have any condition or have you in the past sustained any injury that would have an effect on your ability to work with or without reasonable accommodation? YES____ NO____

3. Do you currently have or have you in the past experienced any back or joint injury/disorders requiring medical treatment? YES____ NO____

4. Do you currently have or have you in the past experienced any injury/disorder to one or more of your extremities which required medical treatment? YES____ NO____

5. Please circle the maximum you can lift and carry on a regular / consistent basis during your shift?
Circle One: **25 lbs.** **26-50 lbs.** **51-75 lbs.** **76-100 lbs.**

CAN YOU PERFORM THE FOLLOWING ON A REGULAR / CONSISTENT BASIS?

- | | |
|--|--|
| <ul style="list-style-type: none"> ■ Stand for long periods of time? YES____ NO____ ■ Work around dust and wear a respirator? YES____ NO____ ■ Grip, grasp and twist your hands and wrists regularly during your shift? YES____ NO____ ■ Can you work a 12-hour shift, if required? YES____ NO____ ■ Can you begin or change shifts on short notice? YES____ NO____ | <ul style="list-style-type: none"> ■ Bend, stoop, reach or climb consistently? YES____ NO____ ■ Endure noise, heat and cold regularly? YES____ NO____ ■ Wear safety equipment when and as required? (hard hats, goggles, belts, etc.) YES____ NO____ ■ Can you work overtime on short notice? YES____ NO____ |
|--|--|

SIGNATURE

DATE
